



Open to ages *10 & up
***13 yrs & younger must**
be accompanied by an
adult (no fee if assisting
on youth decoy.)

Kids & Parents
Friends & Family
Girls & Boys



Decoy Carving & Painting

Registration Opens Monday, May 23

Sponsored by the Washington Brant Foundation in partnership with Burlington Parks & Recreation



Instructor: Kurt Benson,
decoy carver for 15+ years.

REGISTER:

Burlington Parks and Recreation

900 E. Fairhaven Avenue
Burlington, WA 98233

Phone: 360-755-9649

Fax: 360-755-1017

E-mail: recreation@burlingtonwa.gov

Visa/MC/DS Cards accepted by phone

In this 8-week course you will gain skills on how to hand carve and paint your own **Drake Bufflehead Decoy**. Receive complete training on carving a cork body and wood head. Then, final preparation and instruction of texture painting in acrylic paint.

Wednesdays (8 classes)

August 24-October 12, 2016

5:00pm—7:00pm

Burlington Comm Center

\$30 per youth *10-17yrs old

\$40 per adult

Pre-register by August 17



Sign up quick before the
class is sold out!

Min 2/Max 10



DON'T DELAY, THIS CLASS USUALLY SELLS OUT QUICKLY!

REGISTRATION FORM

Registration Information:

Pre-Registration is required for all classes to ensure class minimums are met, unless otherwise stated. All classes/programs have a minimum and maximum enrollment. Payment is required at the time of registration. Accepted forms of payment are Visa/MasterCard/Discover, Cash or Checks made payable to Burlington Parks & Recreation (or B.P.R.)

4 Ways to Register:

PHONE... Call 360-755-9649 with your Visa/MasterCard/ Discover

MAIL..... Send payment & completed registration form to:

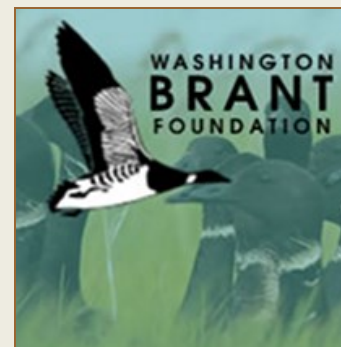
Burlington Parks & Recreation

900 E. Fairhaven Avenue

Burlington WA 98233

DROP BOX.. Submit your completed registration form along with payment in the Parks & Rec drop-box located in the Fairhaven Avenue parking lot (underneath maple tree).

FAX..... Fax completed registration form with your Visa/ MasterCard/ Discover info to 360-755-1017.



Adult's First & Last Name: _____

Mailing Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell: _____ Email: _____

First & Last Name of Participant(s)	Birthdate*	Gender	Fee Amount	DUCK DECOY CARVING & PAINTING AUGUST 24 – OCTOBER 12 \$30 PER YOUTH 10-17YRS \$40 PER ADULT

***Participants 13yrs & younger must be accompanied by an adult. No additional fee if assisting on youth decoy.**

PARTICIPATION AGREEMENT and LIABILITY RELEASE:

I recognize that my involvement in any Burlington Parks and Recreation activity is at my own risk. I have voluntarily made a choice to participate in this activity and expressly assume and accept the risks inherent in the activity. I accept responsibility to behave prudently and to conduct myself in a safe manner. I agree to release, hold harmless and indemnify the City of Burlington, its employees, elected officials, appointed officers, volunteers, instructors and agents from and against any and all claims, suits, actions or liabilities for injury or death of any person, or for loss or damage to property, which arises out of participation in this activity except only such injury or damage as shall have been occasioned by the sole negligence of the City of Burlington. This release is binding as to any other person, including family members, heirs and executors. If I am signing on behalf of a minor, I recognize that I may not release any claim the minor may have. However, I accept full responsibility for all medical expenses and claims incurred as result of the minor's participation in, or travels to and from this activity. I also agree to release, hold harmless and indemnify the City of Burlington, its employees, elected officials, appointed officers, volunteers, instructors and agents for any claims brought by the minor.

PHOTO RELEASE: I understand that photographs/videos taken during program participation may be used by the City of Burlington for the purpose of marketing/promotion. Furthermore, I grant full permission to the City of Burlington to use the photographs/video for this purpose.

✕

Signature of Adult Participant or Legal Parent/Guardian

Today's Date

☐ Visa/MC/DS # _____ ☐ CHECK (Payable to BPR) # _____ ☐ CASH

Exp Date _____ 3-Digit Numeric _____ Cardholder Name: _____

☐ Billing address on card statements is the same as my address listed above.

☐ Billing Address is: _____

